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Bib Data Sheet

CONFIRMATION NO. 8382

SERIAL NUMBER 10/054,366	FILING OR 371(c) DATE 01/22/2002 RULE	CLASS 707	GROUP ART UNIT 2164	ATTORNEY DOCKET NO. YOR9-2001-0647US1
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APPLICANTS

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** CONTINUING DATA ***** None

** FOREIGN APPLICATIONS ***** None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
03/07/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 5	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS
29683

TITLE

A SYSTEM AND METHOD FOR DETECTING DUPLICATE AND SIMILAR DOCUMENTS

FILING FEE RECEIVED 1578	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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